

MONTHLY PREMIUMS for COBRA MEMBERS

Rates for 2010

CHOICE PPO PLAN (80/20)

	Total Premium
Single	\$311.10 (\$305.00 + \$6.10)
Family	\$856.80 (\$840.00 + \$16.80)

CHOICE PLUS PLAN (90/10)

	Total Premium
Single	\$510.00 (\$500.00 + \$10.00)
Family	\$1275.00 (\$1250.00 + \$25.00)

BASIC CHOICE PLAN (50/50)

	Total Premium
Single	\$279.99 (\$274.50 + \$5.49)
Family	\$685.44 (\$672.00 + \$13.44)

COPAY CHOICE PLAN

	Total Premium
Single	\$362.10 (\$355.00 + \$7.10)
Family	\$1020.00 (\$1000.00 + \$20.00)

DENTAL CHOICE PLAN

	Total Premium
Single	\$96.90 (\$95.00 + \$1.90)
Family	\$173.40 (\$170.00 + \$3.40)

DENTAL CHOICE PLUS PLAN

	Total Premium
Single	\$112.20 (\$110.00 + \$2.20)
Family	\$255.00 (\$250.00 + \$5.00)

PREVENTATIVE CHOICE PLAN

	Total Premium
Single	\$87.21 (\$85.50 + \$1.71)
Family	\$144.84 (\$142.00 + \$2.84)

BASIC VISION PLAN

	Total Premium
Single	\$4.96 (\$4.86 + \$.10)
Family	\$13.69 (\$13.42 + \$.27)

VISION PLAN PLUS

	Total Premium
Single	\$8.47 (\$8.30+ \$.17)
Family	\$23.34 (\$22.88 + \$.46)

2009 Rates

Total Premium
\$311.10
\$856.80

Total Premium
\$510.00
\$1,275.00

Total Premium
\$279.99
\$685.44

Total Premium
\$362.10
\$1,020.00

Total Premium
\$96.90
\$173.40

Total Premium
\$112.20
\$255.00

Total Premium
\$87.21
\$144.84

Total Premium
\$4.44
\$6.93

Total Premium
\$6.48
\$13.97